PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Free At Last PAC P.O. Box 66243 ADDRESS (number and street) (Check if address is changed) Washington 20035 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS satterfield.david@arentfox.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.freeatlastpac.com (Check if address is changed) DATE 2013 C00547117 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. **David Satterfield** Type or Print Name of Treasurer David Satterfield [Electronically Filed] 09 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. **FEC FORM 1**

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